| Caption of Case)  Request for Certification of the U Service Funds Pursuant to 47 C.F Telecommunications Act Section Communications Commission CC (2014); and Annual Reports for E | se of Universal ) (R. 54.314 and ) (254(e), Federal ) (Docket No. 96-45 ) | BEFOR PUBLIC SERVIC OF SOUTH COVER  DOCKET NUMBER: 2014 | E COMMISSION<br>CAROLINA        |
|--|---|---|---------------------------------|
| (Please type or print)  Submitted by: Mark Lammert   |   | SC Bar Number:  |                                 |
| Address: 740 Florida Central Pa  |   | Telephone: 407-260-<br>Fax: 407-260-<br>Other:          |                                 |
|  |   | Email: regulatory@csilong                               | wood.com                        |
| NOTE: The cover sheet and information as required by law. This form is required be filled out completely.  DOC  Emergency Relief demanded in                                       | CKETING INFORMA   |   | e purpose of docketing and must |
| Moomerang Wireless   | , LLC d/b/a enTouch Wirele  | ess - Copy of FCC Form 481                              |                                 |
| INDUSTRY (Check one)   | NATUR   | RE OF ACTION (Check all th                              | at apply)                       |
| Electric   | Affidavit   | Letter  | Request                         |
| ☐ Electric/Gas   | Agreement   | Memorandum  | ■ Request for Certification     |
| Electric/Telecommunications  | Answer  | Motion  | Request for Investigation       |
| Electric/Water   | Appellate Review  | Objection   | Resale Agreement                |
| Electric/Water/Telecom.  | Application   | Petition  | Resale Amendment                |
| Electric/Water/Sewer   | Brief   | Petition for Reconsideration                            | Reservation Letter              |
| Gas  | Certificate   | Petition for Rulemaking                                 | Response                        |
| Railroad   | Comments  | Petition for Rule to Show Cause                         | Response to Discovery           |
| Sewer  | Complaint Complaint   | Petition to Intervene                                   | Return to Petition              |
| ▼ Telecommunications   | Consent Order   | Petition to Intervene Out of Time                       | Stipulation                     |
| Transportation   | Discovery   | Prefiled Testimony                                      | Subpoena                        |
| Water  | ☐ Exhibit   | Promotion   | Tariff                          |
| ☐ Water/Sewer  | Expedited Consideration   | Proposed Order  | Other:                          |
| Administrative Matter  | Interconnection Agreement   | Protest   |                                 |
| Other:   | Interconnection Amendment   | Publisher's Affidavit                                   |                                 |
|  | Late-Filed Exhibit  | Report  |                                 |
|  | Print Form  | Reset Form  |                                 |



June 10, 2014

Jocelyn Boyd, Chief Clerk of the Commission Public Service Commission of South Carolina Synergy Business Park, Saluda Building 101 Executive Center Drive Columbia, SC 29210

RE: Docket No. 2014-14-C – Lifeline Certification on FCC Form 481 – Carrier Annual Reporting Data Collection Form on behalf of Boomerang Wireless, LLC d/b/a enTouch Wireless

Dear Ms. Boyd,

Pursuant to FCC requirements under 47 C.F.R. § 54.422, enclosed please find for filing in the above-referenced docket a copy of Boomerang Wireless, LLC d/b/a enTouch Wireless's FCC Form 481 – Carrier Annual Reporting Data Collection Form.

An extra copy of this letter is enclosed to be date-stamped and returned to us in the self- addressed, postage-paid envelope.

If you have any questions regarding this filing, please contact me at (407) 260-1011 or regulatory@csilongwood.com.

Respectfully submitted,

Mark Lammert Attorney-in-Fact

Boomerang Wireless, LLC d/b/a enTouch Wireless

| FCC Fo           | rm 481 - Carrier Annual Reporting  Data Collection Form                        | FCC Form AB3<br>ONIT Control No. 3060-0364/ OM6 Control N<br>July 2013   | ic. 3060-0819  |
|------------------|--|--|--|
| <010>            | Study Area Code  | 2490;3   |  |
| <015>            | Study Area Name  | Roomerang Whireless U.C.   |  |
| <020>            | Program Year   | 2015   |  |
| <030>            | Contact Name. Person USAC should contact with questions about this data        | Mark Janmert   |  |
| <035>            | Contact Telephone Number:<br>Number of the person identified in data line <030 | 4072Colett dat.<br>De  |  |
| <039>            | Contact Email Address:<br>Email of the person identified in data line <030>    | regularony*csillorgwood.com  |  |
| 4 4 4            | al reporting for all carriers  | 54.313<br>Completion<br>Required   | 54.422<br>Completion<br>Required   |
| <100>            | Service Quality Improvement Reporting  | (theck bos when to omplete alton hed worksheet)  | n complete)  |
| <200×            | Outage Reporting (voice)   | (complete attached works) ret)   | 1  |
| <210>            | / <del></del>  | no outages to report   | <u>IIIII.</u>  |
| <300>            | Unfulfilled Service Requests (voice)   |  |  |
| <310>            | Detail on Attempts (voice)   |  | 111111   |
|                  |  | (attach descriptive discument)   |  |
| <370>            | Unfulfilled Service Requests (broadband)                                       |  | IIIII  |
|                  |  |  |  |
| <330>            | Detail on Attempts (broadband)   | fattach descriptive document)  |  |
| <400>            | Number of Complaints per 1,000 customers (voice                                | e)   |  |
| <410>            | fixed  |  | 1  |
| <420>            | Mobile <u>[e_r</u>   | adbandl  |  |
| <440>            | Fixed  |  | *****  |
| <450>            | Mobile Service Quality Standards & Consumer Protection                         | Rules Comphance (check to indicate certification)  |  |
| <\$00>           | 249019 SC Section 5:0.pdf  | [part   part   p | <u> </u>   |
| <510>            |  | (uttached descriptive document)  | 1  |
| 1710-            |  |  | ·  |
| <600>            | Functionality in Emergency Situations  | (check to inscale certification)   | 1  |
|                  | 24 mil e je nji se ni tem 160 m polit  |  | <del></del>  |
|                  |  | fattached descriptive document)  |  |
| <610>            |  |  |  |
|                  | Company Price Offerings (voice)  | (complete attached worksheet)  |  |
|                  | Company Price Offerings (broadband)  | (complete attached worksheet)  | mini.  |
|                  | Operating Companies and Affiliates   | (complete attached worksheet)  (if yes, complete attached worksheet)   | THE S  |
|                  | Tribal Land Offerings (Y/N)?  Voice Services Rate Comparability                | (sheet to install settheation)   | <u> </u>   |
| <1010:           | ,  | (attach descriptive document)  | mm   |
| <1100.           | Terrestrial flackhaul (Y/N)?   | (4 not chess to indicate setification)   | ann e  |
|                  | $\circ$  | (complete attached worksheet)  | iiiin  |
| <1110><br><1200> | Terms and Condition for Lifeline Customers                                     | (complete attuched mulshert)   | /  |
|                  | Price Cap Carriers, Proceed to Price Cap Additiona                             |  |  |
| < 2000>          | Including Rate of Return Carriers affiliated with                              | Price Cap Local Exchange Carriers (check to nareale certification)   | THE STATE OF THE S |
| <2005>           |  | framplete attached worksneet!  |  |
| . 1000           | Rate of Return Carriers, Proceed to ROR Addition                               | i i  | ann  |
| <3000><br><3005> |  | (check to namate certification) (complete attached worksheet)  | inen.  |

|       | rvice Quality Improvement Reporting<br>Illection Form  |                                     | FCC Form 481<br>OMB Control No. 3060-0986/OMB Control No. 3060-0819<br>July 2013 |
|-------|--|-------------------------------------|--|
|       |  |                                     |  |
| c919» | Study Area Code  | , 3 - 2 . 4                         |  |
| -015> | Study Area Name  | B. Sarana William Col.              |  |
| <020> | Program Year   | 34 1                                |  |
| <030> | Contact harne - Person USAC should contact regarding this data   | Mark 12 mmer*                       |  |
| <035> | Contact Telephone Number - Number of person identified in data line <030>  |                                     |  |
| <039> | Contact Email Address - Email Address of person identified in data line <030>  | tegrifut stypes silve places - run. |  |
| <110× | reas your company received its ETC certification from the ECC?   | (yes/no) O                          |  |
| -111> | if your enswer to Line <110 - is yes, du you have an existing \$54,202(a) "5 year plan. Eled with the ECC?"  | (yes / no) O                        |  |
|       | dyour answer to Line < 1115 is yes, then you are required to file a progress report, on line < 1125 delineating the status of your company's exitting § 54.202(a) "5 year plan" on file with the ECC, as it relates to your provision of voice telephony service.                              |                                     |  |
| <112× | Attach five Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54-313[a](1). If your CETC which only receives frozen support, your progress report is only   | company is #                        |  |
|       | required to address voice telephony service  |                                     |  |
|       |  |                                     | Name of Attached Document  |
|       | Please check these boses below to confirm that the attached documents(s), on 1<br>112 contains a progress report on its five-year service quality improvement<br>plan pursuant to § \$4.202(a). The information shall be submitted at the wire<br>center level or census block as appropriate. | ine .                               |  |
| c113+ | Maps detailing progress towards meeting pran targets   |                                     |  |
| .314> | Report how much universal service (USF) support was received   |                                     |  |
| +115> |  |                                     |  |
| e116> | How (USF)was used to improve service coverage  |                                     |  |
| <117> |  |                                     |  |
| <118> | Provide an explanation of network improvement largets not met in the prior calendar year.  |                                     |  |
|       |  |                                     |  |

| (200) Service Outage Reporting (Voice) | FCC Form 481  |
|--|---|
| Data Collection Form                   | OMB Control No. 3060-0386/OMB Control No. 3060-0819 |
|  | July 2013   |
|  |   |

| katās – Maty Ares Coste  | 24 - 3   |
|--|--|
| eates Study Ares hame  | 40 - 5,4 - 1 K: 10 - 244 - 12 -  |
| Offis Program Year   | 2.1  |
| 40303 Contact Name. Person 3540 should contact regarding this data.                          | Maria, Tuesdamp  |
| <u35> Contact Telephone Number - Number of person identified in data fine &lt;0.30&gt;</u35> | ( (4 tol.) )   |
| (3)39> Contact final Address Email Address of person identified in data line 40:40>          | يا ما والمعالم المعالم |

| 32 | 140                       | *b1>                 | *11.2.   | 4612               | 1042 | *61*                            | 462                          | 547                                      | 16)   | *1>   | <g,< th=""><th>e lg a</th></g,<>   | e lg a                     |
|----|---------------------------|----------------------|--|--------------------|------|---------------------------------|------------------------------|--|---|---|--|----------------------------|
| Re | NORS<br>rierente<br>imber | Outage Start<br>Date | Outage Start<br>Time                           | Outage End<br>Data |      | Number of<br>Customers Affected | Total Number of<br>Customers | 911 Facilities<br>Alferted<br>(Yes / No) | Service Outage Description (Check all that apply) | Did This Outage<br>Affect Multiple<br>Study Areas<br>(Yes / No) | Service Outage<br>Resolution   | Preventative<br>Procedures |
|    |                           |                      |  |                    |      |                                 |                              |  | <b></b>   |   |  |                            |
| ·  |                           |                      |  |                    |      |                                 |                              |  |   |   |  |                            |
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|        | e Offerings in<br>action Form | cluding Voice Rate D  | ala   |   | Ž(XX)  |  |  | CC Form 481<br>DM8 Control No. 3060-0986/ON<br>Uly 2013  | iB Control No. 3060 0819   |
|--------|-------------------------------|---|---|---|--|--|--|--|--|
| -010>  | Mudy Area (n                  | de  |   |   | 24 361 -   |  |  |  |  |
| 1      | Study Area Na                 | A-P-Car   |   |   |  | Rank Krist State Color   |  |  |  |
|        | Program tear                  |   | or species of desperant the comments                          |   | 4731   |  |  |  |  |
|        |                               | Person U.A. should  | contact regards   | ing this data   | Hara rege  | , .  |  |  |  |
|        |                               | hone Namper Normbr  |   |   |  |  |  |  |  |
|        |                               | Address final Addre   |   |   |  | · · · · · · · · · · · · · · · · · · ·  | and the second s |  | ,  |
| ×7079  | Single State w                | çal Service (Targe Effe<br>nde Resider (tal Scoral S  | eryice Charge   |   | and the state of t |  |  | an also the State  | / . <b></b>  |
| C70.49 | 4412                          | - Q3>   | <## style="background-color: blue; color: blue; color: blue;" | <b>461&gt;</b>  | Residential (ocal  | (b3>   | <b>(b4)</b>  | <br>Mandetory Extended Area  | <del></del>  |
|        | State                         | Exchange (HEC)  | SAC (CETC)  | Rate Type   | Service Rate   | State Subscriber Line Charge   | State Universal Service Fee  | Service Charge   | Intal per line Rates and Tee   |
|        | 71014                         | Cachenge  | 1 22  |   |  |  |  |  |  |
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|       | dband Price Offerings<br>ction Form |   |                           |                         |                     | 4   | FCC Form<br>OMB Cont<br>July 2013                |                         | OMB Control Na. 3040-01  |
|-------|-------------------------------------|---|---------------------------|-------------------------|---------------------|---|--|-------------------------|--|
| -010- | Study Area Cade                     |   |                           | , 4 9ul -               |                     |   |  |                         |  |
| sas5> | Study Area Name                     |   |                           | வல்கள், சி.மு. சு. செ   | , r sq              |   |  |                         |  |
|       | Program Year                        | -   |                           |                         |                     |   |  |                         |  |
|       |                                     | SAC should contact regarding II                                   |                           | WALK 1.8 TH             |                     |   |  |                         |  |
|       |                                     | er. Number af person identifis<br>inso Addiess af person identifi |                           | requisitor e di         | Contract of 1 con   |   |  |                         |  |
|       | <st></st>                           | 442>  | - 4 <b>51&gt;</b> - 1,714 | <b2></b2>               | - « <u>«</u>        | - 1/20X (481)                                   | ed?>   | 41»                     | (84)   |
|       | State                               | t suttange (ILEC)   | Arsidentisi Kala          | State Regulated<br>Fees | Tatal Rate and Fees | Broadband Service -<br>Download Speed<br>(Mbps) | Broadband Service -<br>Upload Speed (Mbps)       | Usage Alloweser<br>[GB] | Usage Aflowance<br>Action Taken When<br>Limit Reached (select) |
|       |                                     |   |                           |                         | <del> </del>        |   |  |                         |  |
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| (800) Operating Companies Data Collection Form                                |                                      |               | FCC Form 481  DNB Control No. 3060-0946 (OMS Control No. 3060-0819  July 2013 |
|---|--------------------------------------|---------------|---|
|   | 18 1 125 - 780 - 1 100 may mile 1810 |               |   |
| Auto Study Area Code  | 249-114                              |               |   |
| CALLY Study Area Name   | Burtera in the Back                  | <u> </u>      |   |
| <026> Triggant Year   | . ; .                                |               |   |
| citios Contact Name Person USA: should contact regarding this data            | V 1/ K - V4004                       |               |   |
| 1985 Contact Lelephone Number. Number of person identified in data line       | <030> 487,6917.1 881                 |               |   |
| c0392 Cuntact Email Address - Email Address of person identified in data line | <030> +eq. area, eres sea            | n paravil 1 K |   |
|   |                                      |               |   |
| uktor Reporting Careers will emission of the east of the allestrate           | . Acceses                            |               |   |
| -810> Hokking Company on ventions 510   |                                      |               |   |
| K8129 Operating Company of Transaction 677                                    |                                      |               |   |
|   | :                                    | 42> 1         |   |
| CRITY CRITY   |                                      | SAC           | Doing Business As Company or Brand Designation                                |
|   |                                      |               |   |
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|        | bal Lands Reporting<br>laction Form   |             | FCC Form 48<br>OMB Control<br>July 2013   | 1<br>No. 3060-0986/OMB Control No. 3060-081 | 9 . |
|--------|---|-------------|---|---|-----|
|        |   |             | , evely   |   |     |
| <010>  | Study Area Code Study Area Name   |             | -communication of recent Cod  |   |     |
| ·020>  | Program Year  |             | 2028  |   |     |
| <030>  | Contact Name - Person USAC should contact regarding this data                                   |             | Nach Larres   |   |     |
| <035>  | Contact Telephone Number - Number of person identified in data line <                           | 030>        | 4)?lettoti es   |   |     |
| <039>  | Contact Email Address - Email Address of person identified in data line                         | 030>        | engreet organizations/such res  |   |     |
| <910×  | fribal Land(s) on which CTC Serves  |             |   |   |     |
| <920»  | Enbal Government Engagement Obligation  |             | Name of Attached Document   |   |     |
| If you | company serves Tribarianus, please select (Yes, No, NA) for each these boxes                    |             |   |   |     |
|        | firm the status described on the attached document(s) or line 970.                              |             |   |   |     |
| demos  | istrates coordination with the Tribal government pursuant to                                    | Sel<br>(Yes | · · ·   |   |     |
| 6 44 3 | 13(a)(9) indicates  | 1.          | 4)  |   |     |
| <4/1>  | Needs assessment and deployment planning with a focus on Initial community anchor institutions. | 77          | ZZ  |   |     |
| (972)  | trasibility and sustanability planning.   |             |   |   |     |
| <923>  | Marketing services in a culturally sensitive manner   |             |   |   |     |
| (9/4)  | Compliance with Rights of way processes   |             |   |   |     |
| <925×  | Compliance with Land Use permitting requirements  |             |   |   |     |
| s926>  | Compliance with Facilities Siting rules   |             | Tanada and |   |     |
| <9272  | Compliance with Environmental Review processes  |             |   |   |     |
| 928>   | Compliance with Cultural Preservation review processes  |             |   |   |     |
| <929×  | Compliance with Iribal Business and Dicensing requirements.                                     | L           |   |   |     |

|         | o Terrestrial Beckhaul Reporting<br>ection Form  | FCC Form 481<br>OMB Control No.: 3060-0936/CMB Control No.: 3060-0819<br>July 2013   |
|---------|--|--|
| <010>   | Study Area Code  | 2447.52  |
| <015>   | Study Area Name  | Instanting national in   |
| <.020 > | Program Year   | 3635   |
| «O3O»   | Contact Name - Person USAC should contact regarding this data  | Mark Targetter   |
| <035>   | Contact Telephone Number - Number of person identified in data line <030>  | failthight ex.   |
| <039>   | Contact Email Address - Email Address of person identified in data line <030>  | [ P ] [ ] 4 f r ( ) x i x [ ] ( [ P ] hr x - 5 - 1 hr x - |
| <1170°  | Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54-313(G)   |  |
| - 1130× | Please check this book to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54-313(G) |  |
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| ifeline  | ns and Condition for Lifeline Customers   | FCC Form 481  ONIB Control No. 3060-0986/OMB Control No. 306  July 2013  | 0-0919 |  |  |  |
|----------|---|--|--------|--|--|--|
| ara cone | 20011011  |  |        |  |  |  |
| 2105     | Study Area Code   | A Committee of the Comm |        |  |  |  |
|          | Study Area Name   | traineration with order the  |        |  |  |  |
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|          | timber. Number of person identified in data   | ine <030> 145,45,231 - 24  |        |  |  |  |
| <039>    | Contact Telephone sourdies - Nos des<br>Contact Email Address - Email Address of person identified in data  | line <030> segut scarrent suggested of the   |        |  |  |  |
|          | Terms & Conditions of Voice Telephony Lifeline Plans  Lok to Public Website   | Name of Attached Document  |        |  |  |  |
| ×1320×   |   | :710   |        |  |  |  |
|          | here these noises below, $t_{2,3}$ and $\epsilon m$ that the attached document(s), on line based on line 1 $\epsilon$ 10, contains the required information pursuant to |  |        |  |  |  |
| 4 54 422 | give asset to the string for ETCs receiving low-income support, carriers mi   | ne)  |        |  |  |  |
| annualis |   |  |        |  |  |  |
| <1221>   | information describing the terms and conditions of any voice telephony service plans offered to Lifetine subscribers.   |  |        |  |  |  |
|          | the plan.   |  |        |  |  |  |
| <12222   | Details on the number of minutes provided as part of the plan,  |  |        |  |  |  |

| Data Colle  | ce Cap Carrier Additional Documentation  | FCC Form 481<br>OME Central No. 3060-0986/DM8 Control No. 3060-0819<br>tuly 7013   |  |  |  |
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| including Rate of Return Carriers affiliated with Price Cap Local Exchange Carriers |  |  |  |  |  |
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|   | support as set forth in 47 CFR § 54.51 s(B),(C),(O),   | (a) the management of the control of |  |  |  |
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| c015>  |   | Boomerang Mireless LLC     |
| <0.20> | Program Year  | 2015                       |
|        | Contact Name - Person USAC should contact regarding this data                 | Mark Lammert               |
|        |   | 4373451031 ext.            |
| <039>  | Contact Email Address - Email Address of person identified in data line <030> | regulatory*csilong*ood.co~ |

## TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

## Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients I certify that I am an officer of the reporting carrier, my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. Name of Reporting Carrier Missing and Rice Laws Link Signature of Authorized Officer Offic

| rtification - Agent / Carrier<br>sta Collection Form   | FCC Form 481<br>OMB Control No. 3060-0986/OMB Control No. 3060-0819<br>July 2018 |
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| The Particular of the National States and the State | :44019   |
| c010 - Stody Area Code   | Roomerand Wireless 11-   |
| c015> Study Area Name  | 2334   |
| (D20) Program Year<br>(D30) Contact Name   Person USAC should contact regarding this data  | Mark barabort  |
| (030) Contact Name Fersion Copy Contact Telephone Number Number of person identified in data line <0302  | 4072b6:311 6xt.  |
| (030) Contact Email Address - Einail Address of person identified in data line (030)   | requistorywessilonowood.com  |

## TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

|   | rize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier   |  |  |
|---|--|--|--|
| [Is authorized to submit the information reported on behalf of the report [I certify that [Hame of Agent]] [I support [I certify that [Hame of Agent]] [I |  |  |  |
| ame of Authorized Agent   |  |  |  |
| ame of Reporting Carrier  | Date   |  |  |
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| inted name of Authorized Officer  |  |  |  |
| tie or position of Authorized Officer:  |  |  |  |
| elephone number of Authorized Officer   | D. Deutster Hullard  |  |  |
| Udy Area Code of Reporting Carrier  | Filing Due Date for this form  be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. \$4.502, 503(b), or fine or imprisonment under fille 18 of the Police States Code, 18 U.S.C. \$1001 |  |  |
| - Land Care Care  | he punished by fine or forfeiture under the Communications ACL of 1724, \$7.00 per under fixte 18 of the United States Code, 18 U.S.C. \$ 1001   |  |  |

## TO BE COMPLETED BY THE AUTHORIZED AGENT:

| Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier  |          |  |  |  |
|---|----------|--|--|--|
| l, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provide the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate. |          |  |  |  |
| ame of Reporting Carrier  |          |  |  |  |
| ame of Authorized Agent or Employee of Agent.   | Date     |  |  |  |
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Attachments



FCC Form 481

Section 500 - Service Quality Standards & Consumer Protection Rules Compliance

Under FCC Rules, Section 54,202, an ETC must comply that it will satisfy applicable consumer protection and service quality standards. Boomerang Wireless, LLC d/b/a enTouch Wireless (Boomerang) is in compliance with the Cellular Telecommunications and Internet Association's Consumer Code for Wireless Service.

- 1. Boomerang discloses rates and terms of service to customers at the time service is initiated. These same terms and conditions are posted on Boomerang's website at www.entouchwireless.com.
- 2. Boomerang provides service availability information on their website at www.entouchwireless.com.
- 3. Boomerang makes available contract terms to subscribers when they initiate or change service. These same terms are available to subscribers during the annual recertification process as outlined in Commission rules that govern continued subscriber eligibility.
- 4. Boomerang's Lifeline service can be terminated at any time by either party without an early termination fee. Service is dependent on continued eligibility in the program.
- 5. Boomerang provides disclosures, minutes included in Lifeline plans, expiration of plan minutes, availability of service, and cost for additional minutes in all published Lifeline advertising materials.
- 6. Boomerang customers are provided options if they exceed the number of minutes provided in their Lifeline plan. Customers can purchase standard top up plans at thousands of local retail establishments and through customer service. Plan descriptions are available on the company website at www.entouchwireless.com.
- 7. Boomerang's toll-free customer service number is 866-488-8719. Customers can reach customer service by dialing 611 from their enTouch phone. Customers can also contact Boomerang via email at support a entouchwireless com or by US mail. This information is provided in the terms of service and on the company website and in all information provided to subscribers.
- 8. Boomerang responds to all consumer inquiries and complaints received from government agencies within 30 days.
- 9. Boomerang has procedures in place to maintain the privacy of subscriber proprietary information in accordance with applicable federal and state laws.
- 10. At service initiation, Boomerang requests that subscribers "Opt In" to receive free notifications regarding activation status, balance alerts, etc. Customers can also decline to receive these messages and notices by "Opting Out". If a subscriber chooses to decline free notifications they will receive only those Lifeline notifications required by the FCC such as the 30-day non-usage notice, the recertification notices, etc. The customer cannot opt out of the required FCC notifications.



FCC Form 481 Section 600 - Functionality in Emergency Situations

Under FCC Rules, an ETC must demonstrate its ability to remain functional in emergency situations. Since Boomerang Wireless, LLC d/b/a enTouch Wireless (Boomerang) is providing service to its customers through the use of facilities obtained from other carriers, it is able to provide to its customers the same ability to remain functional in emergency situations as currently provided by the carriers to their own customers, including access to a reasonable amount of back-up power to ensure functionality without an external power source, re-routing traffic around damaged facilities, and the capability of managing traffic spikes resulting from emergency situations.

Boomerang, along with their underlying carriers, have created back-up systems to ensure functionality in the event of a loss of power or network functionality. Boomerang's support facilities are housed in a carrier-class data center with fully redundant power and HVAC, a controlled temperature and humidity environment, fire-threat detection and suppression, year-round critical monitoring, and secure access with biometric security. The facility features redundant generators and redundant fiber optic connectivity. The data center is a reinforced concrete building located in a secure area and collocated with the area electrical generation plant. All systems within the facility are implemented on redundant servers, each with redundant data network and power.